

ESL STUDENT MONITORING FORM
Indianapolis Public Schools
FIRST YEAR MONITORING FORM

This student has reached a level of English proficiency that indicates he/she may no longer need *ESL* services. The student will be **monitored for two years**. During this period, the student may re-enter the *ESL* program or be provided other assistance at any time if there are concerns about the students' over-all progress. The student, the parent, or the mainstream teacher(s) may identify concerns.

Student Name: _____ ID# _____ Date: _____

School: _____ Grade: _____ Birth date: _____

Parent(s)/Guardian(s): _____

Address: _____

Month and year of monitoring: _____, 2003 to _____, 2004 Transition Date
 Year one of monitoring – Fill in grading period information for each grading period _____

Concerns after 1st report card:

Concerns after 2nd report card:

Concerns after 3rd & 4th report:

Standardize Test Scores (If Applicable)	Vocabulary	Reading Comprehension	Reading Total	Language Total	Math Total	Date
National Percentile:						

- ☐ After 1 year of monitoring, _____ is performing successfully in the mainstream.
- ☐ After 1 year of monitoring, _____ is having difficulty in the following mainstream classes: _____

After 1 year of monitoring

It is recommended that (check one):

- ☐ direct *ESL* services be re-established on: _____
- ☐ other (specify): _____

Signatures only required if direct *ESL* services are to be re-established.

Signature of Mainstream teacher (elementary): _____

Signature of *ESL* teacher(if available): _____

Signature of Counselor (secondary): _____

Signature of building principal: _____

Signature of parent/guardian: _____

Signature of student: _____